

General Assembly

**Amendment** 

January Session, 2021

LCO No. 7487



Offered by:

SEN. SOMERS, 18th Dist.

To: Subst. House Bill No. 6423

File No. 431

Cal. No. 320

(As Amended by House Amendment Schedules "A" and "G")

## "AN ACT CONCERNING IMMUNIZATIONS."

- Strike everything after the enacting clause and substitute the following in lieu thereof:
- 3 "Section 1. (NEW) (Effective from passage) (a) There is established an
- 4 Advisory Committee on Medically Contraindicated Vaccinations within
- 5 the Department of Public Health for the purpose of advising the
- 6 Commissioner of Public Health on issues concerning exemptions from
- 7 state or federal requirements for vaccinations that result from a
- 8 physician, physician assistant or advanced practice registered nurse
- 9 stating that a vaccination is medically contraindicated for a person due
- 10 to the medical condition of such person. Said advisory committee shall
- 11 not be responsible for confirming or denying any determination by a

physician, physician assistant or advanced practice registered nurse that a vaccination is medically contraindicated for a specific individual. In order to carry out its duties, the advisory committee shall (1) have access to the childhood immunization registry established by the department pursuant to section 19a-7h of the general statutes, (2) evaluate the process used by the department in collecting data concerning exemptions resulting from vaccination being medically a contraindicated and whether the department should have any oversight over such exemptions, (3) examine whether enrollment of an unvaccinated child into a program operated by a public or nonpublic school, institution of higher education, child care center or group child care home should be conditioned upon the child meeting certain criteria, (4) calculate the ratio of school nurses to students in each public and nonpublic school in the state and the funding issues surrounding such ratio, (5) assess whether immunizations should be required more frequently than prior to enrollment into a program operated by a public or nonpublic school and prior to entering seventh grade, and (6) determine whether (A) there are any discrepancies in the issuance of certificates stating that a vaccine is medically contraindicated, and (B) to recommend continuing education of physicians, physician assistants or advanced practice registered nurses in vaccine contraindications and precautions. All information obtained by the advisory committee from such registry shall be confidential pursuant to section 19a-25 of the general statutes, as amended by this act.

- (b) The advisory committee shall consist of the following members:
- (1) Two appointed by the speaker of the House of Representatives, one of whom shall be a physician licensed pursuant to chapter 370 of the general statutes who is a pediatrician, and one of whom shall be a member of the public;
- (2) Two appointed by the president pro tempore of the Senate, one of whom shall be a physician licensed pursuant to chapter 370 of the general statutes who has expertise in the efficacy of vaccines, and one of whom shall be a member of the public;

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45 (3) One appointed by the majority leader of the House of 46 Representatives, who shall be a school nurse;

- 47 (4) One appointed by the majority leader of the Senate, who shall be 48 a physician assistant licensed pursuant to chapter 370 of the general 49 statutes who has experience in the administration of vaccines;
- 50 (5) One appointed by the minority leader of the House of 51 Representatives, who shall be an advanced practice registered nurse 52 licensed pursuant to chapter 378 of the general statutes who has 53 experience in the administration of vaccines;
- 54 (6) One appointed by the minority leader of the Senate, who shall be 55 a representative of the Connecticut Chapter of the American Academy 56 of Pediatrics;
- 57 (7) The Commissioner of Public Health, or the commissioner's designee;
- 59 (8) The Commissioner of Education, or the commissioner's designee; 60 and
- 61 (9) The Commissioner of Early Childhood, or the commissioner's designee.
- 63 (c) The members of the advisory committee shall elect a chairperson 64 of the advisory committee from among its members. Such chairperson 65 shall schedule the first meeting of the advisory committee, which shall 66 be held not later than October 1, 2021. The advisory committee shall 67 meet not less than biannually. On or before January 1, 2022, and 68 annually thereafter, the committee shall report, in accordance with the 69 provisions of section 11-4a of the general statutes, on its activities and 70 findings to the joint standing committee of the General Assembly 71 having cognizance of matters relating to public health.
- Sec. 2. (NEW) (*Effective from passage*) On or before July 1, 2022, and annually thereafter, the Department of Public Health shall identify schools that have less than ninety-five per cent of its students compliant

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with the immunization requirements described in sections 10-204a, 10a-155, 10a-155b, 19a-79 and 19a-87b of the general statutes, as amended by this act, and develop and implement an educational program for such schools, including, but not limited to, hosting a vaccination forum and providing vaccine clinics at schools, provided students have parental consent to attend such forums or clinics. On or before January 1, 2023, and annually thereafter, the Commissioner of Public Health shall report, in accordance with the provisions of section 11-4a of the general statutes, to the joint standing committee of the General Assembly having cognizance of matters relating to public health regarding the schools identified and any educational programs implemented pursuant to this section.

- Sec. 3. Section 19a-79 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):
  - (a) The Commissioner of Early Childhood shall adopt regulations, in accordance with the provisions of chapter 54, to carry out the purposes of sections 19a-77 to 19a-80, inclusive, and 19a-82 to 19a-87, inclusive, and to assure that child care centers and group child care homes meet the health, educational and social needs of children utilizing such child care centers and group child care homes. Such regulations shall (1) specify that before being permitted to attend any child care center or group child care home, each child shall be protected as age-appropriate by adequate immunization against diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, hemophilus influenzae type B and any other vaccine required by the schedule of active immunization adopted pursuant to section 19a-7f, including appropriate exemptions for children for whom such immunization is medically contraindicated and for children whose parent or guardian objects to such immunization on religious grounds, and that any objection by a parent or a guardian to immunization of a child on religious grounds shall be accompanied by a statement from such parent or guardian that such immunization would be contrary to the religious beliefs of such child or the parent or guardian of such child, which statement shall be acknowledged, in accordance with the provisions of sections 1-32, 1-34 and 1-35, by (A) a

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109 judge of a court of record or a family support magistrate, (B) a clerk or 110 deputy clerk of a court having a seal, (C) a town clerk, (D) a notary public, (E) a justice of the peace, or (F) an attorney admitted to the bar of this state, (2) specify conditions under which child care center 113 directors and teachers and group child care home providers may 114 administer tests to monitor glucose levels in a child with diagnosed 115 diabetes mellitus, and administer medicinal preparations, including 116 controlled drugs specified in the regulations by the commissioner, to a 117 child receiving child care services at such child care center or group 118 child care home pursuant to the written order of a physician licensed to 119 practice medicine or a dentist licensed to practice dental medicine in this 120 or another state, or an advanced practice registered nurse licensed to prescribe in accordance with section 20-94a, or a physician assistant 122 licensed to prescribe in accordance with section 20-12d, and the written 123 authorization of a parent or guardian of such child, (3) specify that an 124 operator of a child care center or group child care home, licensed before 125 January 1, 1986, or an operator who receives a license after January 1, 126 1986, for a facility licensed prior to January 1, 1986, shall provide a 127 minimum of thirty square feet per child of total indoor usable space, free 128 of furniture except that needed for the children's purposes, exclusive of 129 toilet rooms, bathrooms, coatrooms, kitchens, halls, isolation room or 130 other rooms used for purposes other than the activities of the children, (4) specify that a child care center or group child care home licensed 132 after January 1, 1986, shall provide thirty-five square feet per child of 133 total indoor usable space, (5) establish appropriate child care center staffing requirements for employees certified in cardiopulmonary 135 resuscitation by the American Red Cross, the American Heart 136 Association, the National Safety Council, American Safety and Health 137 Institute, Medic First Aid International, Inc. or an organization using 138 guidelines for cardiopulmonary resuscitation and emergency 139 cardiovascular care published by the American Heart Association and 140 International Liaison Committee on Resuscitation, (6) specify that on and after January 1, 2003, a child care center or group child care home 142 (A) shall not deny services to a child on the basis of a child's known or 143 suspected allergy or because a child has a prescription for an automatic

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prefilled cartridge injector or similar automatic injectable equipment used to treat an allergic reaction, or for injectable equipment used to administer glucagon, (B) shall, not later than three weeks after such child's enrollment in such a center or home, have staff trained in the use of such equipment on-site during all hours when such a child is on-site, (C) shall require such child's parent or guardian to provide the injector or injectable equipment and a copy of the prescription for such medication and injector or injectable equipment upon enrollment of such child, and (D) shall require a parent or guardian enrolling such a child to replace such medication and equipment prior to its expiration date, (7) specify that on and after January 1, 2005, a child care center or group child care home (A) shall not deny services to a child on the basis of a child's diagnosis of asthma or because a child has a prescription for an inhalant medication to treat asthma, and (B) shall, not later than three weeks after such child's enrollment in such a center or home, have staff trained in the administration of such medication on-site during all hours when such a child is on-site, and (8) establish physical plant requirements for licensed child care centers and licensed group child care homes that exclusively serve school-age children. When establishing such requirements, the Office of Early Childhood shall give consideration to child care centers and group child care homes that are located in private or public school buildings. With respect to this subdivision only, the commissioner shall implement policies and procedures necessary to implement the physical plant requirements established pursuant to this subdivision while in the process of adopting such policies and procedures in regulation form. Until replaced by policies and procedures implemented pursuant to this subdivision, any physical plant requirement specified in the office's regulations that is generally applicable to child care centers and group child care homes shall continue to be applicable to such centers and homes that exclusively serve school-age children. The commissioner shall print notice of the intent to adopt regulations pursuant to this subdivision on the eRegulations System not later than twenty days after the date of implementation of such policies and procedures. Policies and procedures implemented pursuant to this subdivision shall be valid

179 until the time final regulations are adopted.

(b) The commissioner may adopt regulations, pursuant to chapter 54, to establish civil penalties of not more than one hundred dollars per day for each day of violation and other disciplinary remedies that may be imposed, following a contested-case hearing, upon the holder of a license issued under section 19a-80 to operate a child care center or group child care home or upon the holder of a license issued under section 19a-87b to operate a family child care home.

- [(c) The commissioner shall exempt Montessori schools accredited by the American Montessori Society or the Association Montessori Internationale from any provision in regulations adopted pursuant to subsection (a) of this section which sets requirements on group size or child to staff ratios or the provision of cots.]
- [(d)] (c) Upon the declaration by the Governor of a civil preparedness emergency pursuant to section 28-9 or a public health emergency pursuant to section 19a-131a, the commissioner may waive the provisions of any regulation adopted pursuant to this section if the commissioner determines that such waiver would not endanger the life, safety or health of any child. The commissioner shall prescribe the duration of such waiver, provided such waiver shall not extend beyond the duration of the declared emergency. The commissioner shall establish the criteria by which a waiver request shall be made and the conditions for which a waiver will be granted or denied. The provisions of section 19a-84 shall not apply to a denial of a waiver request under this subsection.
- [(e)] (d) Any child care center or group child care home may provide child care services to homeless children and youths, as defined in 42 USC 11434a, as amended from time to time, for a period not to exceed ninety days without complying with any provision in regulations adopted pursuant to this section relating to immunization and physical examination requirements. Any child care center or group child care home that provides child care services to homeless children and youths

at such center or home under this subsection shall maintain a record on file of all homeless children and youths who have attended such center or home for a period of two years after such homeless children or youths are no longer receiving child care services at such center or home.

[(f)] (e) Any child care center or group child care home may provide child care services to a foster child for a period not to exceed forty-five days without complying with any provision in regulations adopted pursuant to this section relating to immunization and physical examination requirements. Any child care center or group child care home that provides child care services to a foster child at such center or home under this subsection shall maintain a record on file of such foster child for a period of two years after such foster child is no longer receiving child care services at such center or home. For purposes of this subsection, "foster child" means a child who is in the care and custody of the Commissioner of Children and Families and placed in a foster home licensed pursuant to section 17a-114, foster home approved by a child-placing agency licensed pursuant to section 17a-149, facility licensed pursuant to section 17a-145 or with a relative or fictive kin caregiver pursuant to section 17a-114.

Sec. 4. (NEW) (*Effective from passage*) On or before January 1, 2022, the Department of Public Health shall develop a program providing community-based educational sessions concerning vaccines. Such sessions shall be open to all residents and include both in-person and virtual question-and-answer sessions with a varied panel of physicians licensed pursuant to chapter 370 of the general statutes, as determined by the Commissioner of Public Health.

Sec. 5. (NEW) (*Effective from passage*) On or before January 1, 2022, the Department of Public Health shall (1) provide sufficient resources to school nurses to allow them to more efficiently track compliance with immunization requirements set forth in the general statutes, and (2) permit school nurses to electronically access the immunization data it reports to the department and update such data as needed to ensure its accuracy."

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This act shall take effect as follows and shall amend the following sections:

| Section 1 | from passage | New section |
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| Sec. 2    | from passage | New section |
| Sec. 3    | from passage | 19a-79      |
| Sec. 4    | from passage | New section |
| Sec. 5    | from passage | New section |